PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
	7590 11/23	/2009	Have			
WHIRLPOOL Suite 102 500 Renaissance		PANY - MD 0750	I he Stat add tran	reby certify that this es Postal Service wit ressed to the Mail S smitted to the USPIC	icate of Mailing or Tran Fee(s) Transmittal is bein h sufficient postage for fi Stop ISSUE FEE address O (571) 273-2885, on the	smission ng deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below.
St. Joseph, MI 4	9085			DEBORAH A. T	· · · · · · · · · · · · · · · · · · ·	(Depositor's name) (Signature)
•				FEBRUARY 22,	2010	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	. A	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/699,308 10/31/2003		Tremitchell Wright	ight US20030459		3931	
TILE OF INVENTION	: NON-AQUEOUS WA	SHING MACHINE & M	iemobs			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUI	E DATE DUE
nonprovisional	МО	\$1510	\$300	\$0	\$1810	02/23/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS			
KHAN, A	AMINA S	1796	008-137000	·		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
ASSIGNEE NAME A PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI HIRLPOOL CORP	less an assignee is ident th in 37 CFR 3.11. Comp GNEE	A TO BE PRINTED ON ified below, no assignee pletion of this form is NO	THE PATENT (print or ty) data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY BENTON HARBOR	atent. If an assignee assignment. Yand STATE OR CO		document has been filed for
lease check the appropr	riate assignee category or	categories (will not be pe	rinted on the patent):	Individual 🖬 Corp	poration or other private gr	roup entity Government
a. The following fee(s) Issue Fee Publication Fee (I Advance Order -	No small entity discount p		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-1660 (enclose an extra copy of this form).			
a. Applicant clain	ntus (from status indicate ns SMALL ENTITY state	us. See 37 CFR 1.27.	b. Applicant is no lon	ger claiming SMALI	_ENTITY status. See 37 (
NOTE: The Issue Fee ar nterest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	ed from anyone other than a Office.	the applicant; a regist	ered attorney or agent; or	the assignee or other party in
Authorized Signature	Michael	1 h fafur		DateFEBR	JARY 22, 2010	
Typed or printed name MICHAEL D. LAFRENZ				Registration No	. 56,908	
This collection of informan application. Confider submitting the complete this form and/or suggest	nation is required by 37 on tiality is governed by 35 and application form to the tions for reducing this bu	CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary	on is required to obtain or 1.14. This collection is es y depending upon the indi- ne Chief Information Offic	retain a benefit by the timated to take 12 m vidual case. Any con er, U.S. Patent and T	e public which is to file (an inutes to complete, includ- iments on the amount of to rademark Office, U.S. De	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450.

Box 1450, Alexandria, Virginia 22 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.